PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers, Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
ARENT FOX I 1050 CONNECT SUITE 400		Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
WASHINGTON	, DC 20036		Γ				(Depositor's assue)	
				***************************************		<u> </u>	(Signature)	
			ľ	***************************************			{Dane}	
APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATT	ORNEY DOCKET NO.	CONFIRMATION NO.		
10/830,099	04/23/2004	<u>,,</u>	Lambert Wixson	Transchiferen skop figeboord de les mendesd	Residentes	024478-00023	7522	
TITLE OF INVENTION:	: METHOD AND SYST	EM FOR IMAGE INFO	RMATION PROCESSI	NG AND AN	VALYSIS			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	SE PREV. P	AID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$755	\$300		\$0	\$1055	10/21/2010	
EXAM	INER	ART UNIT	CLASS-SUBCLASS					
RAO, ANAND SHASHIKAN'T		2621	348-143000	concess.				
Change of corresponde CFR 1,363). Change of corresponders form PTO/SB "Fee Address" indi PTO/SB/47; Rev 03-0.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3							
Number is required. 3. ASSIGNEE NAME AT			listed, no name will	be printed.	***************************************		***************************************	
					nn assignee is u.	identified below, the de	ocument has been filed for	
(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)					
ARROWSIGHT	MOUNT KISCO, NEW YORK							
Please check the appropri	ate assignee category or	categories (will not be pr	inted on the patent):	a Individua	u 🛛 Corpon	ttion or other private gro	up entity Q Government	
4a. The following fee(s) are submitted: Solution: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies 10			th. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Porm PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 0.12300 (enclose an extra copy of this form).					
5. Change in Entity Stat	us (from status indicated		years			VIIIY status. See 37 CF	egyptiminegagydd o fel yn ag egyggleithiad yr ei engleithia fan y carbol fagun y dyr dy'n daell yr dei far fan fan fyr y far	
NOTE: The Issue Fee and	Publication Fee (if requery solution Fee	ilred) will not be accepted	I from anyone other tha	n the applica	at; a registered	l attorney or agent; or th	e assignee or other party in	
Authorized Signature	SHIBU	HOW				er 21, 2010		
Typed or printed name	Registration No. 57,912							
This collection of informa an application. Confident submitting the completed this form and/or suggestic Box 1450, Alexandria, VI Alexandria, Virginia 2231	irginia 22313-1450. DC	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary dea, should be sent to the NOT SEND FEES OR (on is required to obtain 1.14. This collection is depending upon the in a Chief Information Of COMPLETED FORMS	or retain a bes estimated to dividual case licer, U.S. Pa TO THIS A	nefit by the putake 12 minute. Any commetent and Trade	blic which is to file (and es to complete, including fits on the amount of the emark Office, U.S. Depa ND TO: Commissioner I	by the USPTO to process) g gathering, preparing, and ne you require to complete utment of Commerce, P.O. for Patents, P.O. Box 1450.	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.